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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

<p>0010/PTO Rev. 6/95</p> <p style="text-align: center;">U.S. Department of Commerce Patent and Trademark Office</p> <h2 style="text-align: center;">DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</h2> <p> <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing </p>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%;">Attorney Docket Number</td> <td>H 3381 PCT/US</td> </tr> <tr> <td>First Named Inventor</td> <td>Kolowrot, Dirk</td> </tr> <tr> <td colspan="2" style="text-align: center;"><i>COMPLETE IF KNOWN</i></td> </tr> <tr> <td>Application Number</td> <td>09/787,248</td> </tr> <tr> <td>Filing Date</td> <td></td> </tr> <tr> <td>Group Art Unit</td> <td></td> </tr> <tr> <td>Examiner Name</td> <td></td> </tr> </table>	Attorney Docket Number	H 3381 PCT/US	First Named Inventor	Kolowrot, Dirk	<i>COMPLETE IF KNOWN</i>		Application Number	09/787,248	Filing Date		Group Art Unit		Examiner Name	
Attorney Docket Number	H 3381 PCT/US														
First Named Inventor	Kolowrot, Dirk														
<i>COMPLETE IF KNOWN</i>															
Application Number	09/787,248														
Filing Date															
Group Art Unit															
Examiner Name															

As a below named inventor, I hereby declare that:
 My residence, post office address, and citizenship are as stated below next to my name.
 I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SPRAYABLE HOT-MELT ADHESIVE

(Title of the Invention)

the specification of which ☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 09/14/1999 as United States Application Number or PCT International

Application Number PCT/EP99/06799 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
				YES NO
198 43 141.4	Germany	09/21/1998	<input type="checkbox"/>	<input type="checkbox"/> <input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.
		<input type="checkbox"/>

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington DC 20231.

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DECLARATION

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I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365© of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
	PCT/EP99/06799	09/14/1999	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

<input type="checkbox"/> Firm Name		Customer Number	or label	
OR				

☒ List Attorney(s) and/or agent(s) name and registration number below:

Name	Registration Number	Name	Registration Number
Wayne C. Jaeschke	21,062		
Glenn E. J. Murphy	33,539		
Stephen D. Harper	33,243		
Kimberly R. Hild	39,224		

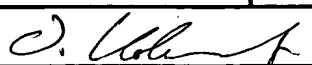
☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to: ☒ Customer Number or label 00423 OR ☒ Fill in correspondence address below

Name	Kimberly R. Hild		
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Fax	610-278-6548		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name	Dirk	Middle Initial		Family Name	Kolowrot	Suffix e.g. Jr.	
Inventor's Signature					Date	April 06, 2001	
Residence: City	Krefeld	State		Country	Germany	Citizenship	Germany
Post Office Address	Schwertstr. 48						
Post Office Address							
City	47799 Krefeld	State		Zip		Country	Germany
Applicant Authority							

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

Type a plus sign (+) inside this box → ☐

H 3381 PCT/US

**ADDITIONAL INVENTOR(S)
Supplemental Sheet****Name of Additional Joint Inventor, if any:**☐ A petition has been filed for this unsigned inventor

Given Name	Heinrich	Middle Initial		Family Name	Traeger	Suffix e.g. Jr.	
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Inventor's Signature	<i>Heinrich Traeger</i>	Date	April 06, 2001
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Residence: City	Meerbusch	State		Country	Germany (D)	Citizenship	Germany
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Post Office Address Azaleenweg 24

Post Office Address

City	40670 Meerbusch	State		Zip		Country	Germany	Applicant Authority	
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Name of Additional Joint Inventor, if any:☐ A petition has been filed for this unsigned inventor

Given Name		Middle Initial		Family Name		Suffix e.g. Jr.	
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Inventor's Signature		Date	
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Residence: City		State		Country		Citizenship	
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Post Office Address

Post Office Address

City		State		Zip		Country		Applicant Authority	
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Inventor's Signature		Date	
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Inventor's Signature		Date	
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Residence: City		State		Country		Citizenship	
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